

NORTH WALSHAM URBAN DISTRICT COUNCIL

REPORT OF  
THE MEDICAL OFFICER OF HEALTH  
FOR THE  
YEAR ENDING DECEMBER 31ST, 1951.



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The Chairman and Members of the North Walsham Urban District Council.

Mr. Chairman, Madam & Gentlemen,

I have the honour to present the Annual Report of the Medical Officer of Health for the year ending December 31st, 1951. No event occurred during the year of sufficient importance to be recorded in the preface to the report.

PRINCIPAL NOTES ON THE YEAR.

The estimated population at mid-year was 4,689, as compared with 4,696 in 1950.  
 The Birth Rate was 10.2 per 1,000 of the estimated population (Eng: and Wales 15.5).  
 The Death Rate was 10.7 per 1,000 of the estimated population (Eng: and Wales 12.5). No death occurred in association with Childbirth.  
 The number of cases of Tuberculosis on the Register shows no change.  
 Two new cases were notified.

GENERAL STATISTICS.

Area in acres - 4,252.  
 Population (Registrar General's estimate) - 4,689.  
 Number of inhabited houses - 1,570.  
 Rateable Value at end of year - £24,737.

VITAL STATISTICS.

<u>Live Births</u>	<u>Males</u>	<u>Females</u>	<u>Total</u>
Legitimate	20	25	45
Illegitimate	2	1	3
Total	22	26	48

The Birth Rate is 10.2 per 1,000 of the estimated population. (Eng: and Wales 15.5). 6.2% of live births were illegitimate.

Still Births.

Legitimate	-	1	1
Illegitimate	-	-	-
Total	-	1	1

The Still Birth Rate is 0.2 per 1,000 of the estimated population or 2% of all births.

DEATHS

The causes of Death were as follows:-

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Tuberculosis of the Respiratory System	-	-	0
Other Tuberculosis	-	-	0
Syphilitic Diseases	-	-	0
Diphtheria	-	-	-
Whooping Cough	-	-	-
Meningococcal Infections	-	-	-
Acute Poillionyelitis	-	-	-
Measles	-	-	-
Other infective and parasitic diseases	-	-	-
Cancer of Stomach	1	-	1
Lung and Bronchial passages	-	-	-
Breast	-	-	-
Uterus	-	-	-
Other malignant and lymphatic growths	1	2	3
Leukaemia and aleukaemia	-	-	-
Diabetes	-	1	1
Vascular Lesions of the Nervous System	4	3	7
Coronary disease and Angina	8	2	10
Hypertension with Heart Disease	1	1	2
Other Heart Disease	6	3	9
Other Circulatory Diseases	1	-	1
Influenza	1	2	3
Pneumonia	-	1	1
Bronchitis	1	-	1
Other diseases of the Respiratory System	1	-	1
Ulcer of the Stomach and Duodenum	-	-	-
Gastritis, Enteritis and Diarrhoea	-	-	-
Nephritis and Nephrosis	-	-	-
Hyperplasia of the Prostate	-	-	-
Pregnancy, Childbirth and Abortion	-	-	-
Congenital Malformations	-	-	-
Other diseases and illdefined disease	6	2	8
Motor Vehicle Accidents	-	-	-
All other accidents	2	-	2
Suicide	-	-	-
Homicide and operations of war	-	-	-
Total	33	17	50

The Death Rate is 10.7 per 1,000 of the estimated population. The causes of death cited above follow the usual pattern, diseases of the Heart and Circulatory system heading the list followed by cancer. No maternal Death occurred in association with Childbirth. Two deaths were reported under 1 year of age both legitimate male children. No child died in the first month of life.

INFECTIOUS DISEASES.

The following table gives in the first column the number of cases of Infectious Diseases that were notified in 1951, and in the second column the number of cases that would have occurred if the Rate for England and Wales had applied:-

<u>Disease</u>	<u>A</u>	<u>B</u>
Acute Pneumonia	-	.5
Diphtheria	-	.1
Erysipelas	-	.7
Food Poisoning	-	.8
Measles	66	66
Meningococcal Infections	-	.1
Paratyphoid	-	.1
Polionyelitis	1	.2
Scarlet Fever	2	.5
Smallpox	-	-
Typhoid Fever	-	-
Whooping Cough	1	14
Acute Encephalitis	- )	Figures not available
Dysentery	- )	
Glandular Fever	- )	
Infective Hepatitis	- )	
Malaria	- )	
Ophthalmia Neonatorum	- )	
Weil's Disease	- )	
Puerperal Pyrexia	2 )	

The next table gives the notifications of infectious diseases by age groups:-

<u>DISEASE.</u>	<u>Under 1</u>	<u>1-2</u>	<u>3-4</u>	<u>5-9</u>	<u>10-14</u>	<u>15-24</u>	<u>25&amp; over</u>	<u>Total</u>
Scarlet Fever	-	-	-	2	-	-	-	2
Whooping Cough	-	-	-	-	-	-	1	1
Polionyelitis	-	-	-	-	-	-	1	1
Measles	1	7	21	33	3	-	1	66
Acute Pneumonia	-	-	-	-	-	-	-	-
Dysentery	-	-	-	-	-	-	-	-
Erysipelas	-	-	-	-	-	-	-	-
Puerperal Pyrexia	-	-	-	-	-	1	1	2
Infective Jaundice	-	-	-	-	-	-	-	-
Total	1	7	21	35	3	1	4	72

The above tables show a satisfactory state of affairs in that the North Walsham figures are mostly without exception below those for England and Wales.



The case of Poliomyelitis was the first for many years. It occurred in December, in a married woman with children. She was at once removed to hospital. Her husband and children were left in isolation in their house for the duration of the incubation period. No further case occurred in the family or in the town.

The two cases of Puerperal Pyrexia call for no special comment. A change was made in the criteria diagnosis of this condition during 1952 by the Puerperal Pyrexia Regulations

The new standard is more inclusive than the old, and a small rise in the number of notifications is therefore to be expected.

#### TUBERCULOSIS.

Two new cases of Tuberculosis were notified during the year, both of them Pulmonary. The case rate for Pulmonary Tuberculosis is therefore 0.43, and that for Nonpulmonary 0.0. The corresponding figures for the administrative County of Norfolk were 0.60 and 0.25. There was no death from Pulmonary Tuberculosis during the year. This compares with a Rate of 0.15 for the Administrative County of Norfolk. The Rate for England and Wales as a whole was 0.31.

The number of cases on the Register on December 31st, 1951. was as follows:-

	<u>Pulmonary</u>	<u>Nonpulmonary</u>	<u>Total</u>
Male	7	1	8
Female	3	4	7
Total	10	5	15

Previous years gave the following figures:-

1950.	Male	6	2	8
	Female	4	4	8
1949.	Male	4	2	6
	Female	5	5	10
1948.	Male	3	2	5
	Female	6	5	11

#### HOUSING

1951 was a year of solid progress in housing. Sixteen were built by the Council. From the public Health point of view the subject is immensely important. The spread of infection is obviously made easier by overcrowded conditions and there is often a by no means insignificant adverse psychological effect on individuals living in them.

Defective houses, with dampness, poor lighting, insufficient ventilation and inconvenient arrangement lower the general resistance of their inhabitants. Shared houses, where competition exists between two or more families for shared facilities, can impose considerable strain on the families concerned.

In North Walsham serious overcrowding is non-existent. There are, as in many ancient towns, a number of houses of poor design providing living conditions far below modern standards. The staircases are in particular inconvenient in the extreme, if not actually dangerous. These houses should be condemned as soon as a sufficiency of new houses has been built. It will be possible to deal with many of these by the procedure of slum clearance under the 1936 Housing Act, and land will thus be released for fresh building within the town. As I write this report, in 1952, the Government restriction on the number of houses that the Council may build has been released, and the considerable local enthusiasm that exists will be given greater opportunities to solve the housing problem with which we are all so concerned.

## SANITARY CIRCUMSTANCES OF AREA

### WATER

Source. Water is pumped from underground workings in the chalk deposits, comprising dug well, adits and borehole, into two nearby water towers.

Quality. The water is of highly satisfactory bacteriological and organic quality, but precautionary chlorination has been carried out. Pressure filt ring is used to remove excess iron from the water. The total hardness is 21° clark, which is mainly temporary.

Tests. Two bacteriological examinations were made, both with highly satisfactory results. One chemical analysis was completed at the mid-year period which was satisfactory.

Plumbo Solvency. The water is on the alkaline side of neutrality and does not produce a plumbo-solvent action.

Contamination. None as regards the public supply,

Modes of supply to Population. Over 96% of the population is supplied with water from the Council's mains, the remainder being mainly in widely scattered farms and cottages. As well as new buildings, several existing dwellings and farms received main supply.

### DRAINAGE & SEWERAGE

The separate system is mainly used and at present about 75% of properties are served. Enlargement of the Council's sewage outfall works and extensions of sewers in eight roads have been put in hand during the year, which, when completed, will materially increase this number.

At present the existing sewage works, though overloaded is producing as pure an effluent as can be expected. It has, however, been found impracticable to accept the Steam Laundry waste until the extensions are finished. The two extensions are about 50% completed (on 31.12.51).

#### Pollution of Rivers and Streams.

Apart from a suggestion that reed growth in the dis-used canal was accelerated by water from the town drain no reports have been received of pollution of waterways or of any injury to their natural flora and fauna.

#### Closet Accommodation.

The good work of improvement of bathroom and water closet accommodation in various cases has continued during the year in a small way, a large advance being impossible until the new sewers are completed.

#### Night Soil Collection.

This has continued without complaint.

#### Disposal of Refuse.

Weekly collections have been maintained in the town area, and fortnightly ones to more outlying properties. Due to construction more houses are served and further outlying properties have been included in the scheme. Collection is by modern closed sanitary vehicle with disposal to controlled tip, and no difficulties have been encountered.

#### Cleansing of Streets.

This is carried out manually by permanent staff and a high standard is maintained.

#### Water Supply and Sanitary Conditions of Schools.

All schools are provided with sewerage and main water supply. There have been no complaints.

#### Factories Act.

Five changes of occupation were recorded. No formal action was found necessary under the Act.

### SANITARY INSPECTIONS.

#### Food Poisoning. No cases.

Unfit Foods. The following foodstuffs were found to be unfit for human food and condemned.

Canned Foods.	Milk	12 tins (Evaporated)
	Vegetables	7 tins.
	Fish and Meats	38 "
	Fruit Juices	3 "
	Jams	3 "
	Fruits	77 "
	Cooked Ham	180 $\frac{3}{4}$ lbs.
	Tomato Purée	3,370.5 kilos.
	Corned Beef	117 $\frac{3}{4}$ lbs.



Fresh Foods.	Wet Fish	12½ stone.
	Meat & Offals	76¼ lbs.
	Cheese	24 lbs.

Routine inspections were carried out at food premises, which proved satisfactory.

Ice Cream. Four samples, falling into provisional grades 1 and 3 were analysed. The two in grade 3 were manufactured outside this district.

#### Housing Inspections.

A further number of houses were inspected and informal notices were sent to persons having control of the dwellings, to execute necessary repairs.

Smoke. One case of smoke nuisance from a factory chimney was reported and subsequent to informal action the furnace and chimney were modified thus abating the nuisance.

#### Rats and Mice.

34 cases of infestation were reported and dealt with by the Council's trained staff. All except four of these infestations were of a minor type.

Additionally the Council's sewers, properties and refuse tip were treated with satisfactory results.

### GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

Public Health Officers to the Local Authority.

#### Medical Officer of Health.

J.H.F. Norbury, M.B.B.S., M.R.C.S., L.R.C.P., D.P.H.

Wholetime: the post is combined with that of Medical Officer of Health for Cromer, Sheringham and the Erpingham Rural District, and Assistant County Medical Officer to the Norfolk County Council.

#### Sanitary Inspector - Mr. J. A. Yates,

M.I.MUN.E., M.S.I.A.

As a result of the National Health Service Act, which came into operation in 1948, Health Services are provided almost entirely by official bodies. There is a limited amount of private practice.

The official bodies are four in number.

#### 1. The Norfolk Executive Council.

This provides the General Practitioner, Dental Pharmaceutical and Ophthalmic Services.

## 2. The Regional Hospital Board.

The Country as a whole has been divided into Regions, and the Regions into areas, for administrative purposes. The N. Walsham Urban District lies in the East Anglian Region, and the Cromer Area. Cromer and District Hospital is the General Hospital for the area, and provides specialist out-patient clinics for patients from anywhere within the Area.

The Sanatoria at Kelling, near Holt, are also administered by the Regional Hospital Board, as are the Fletcher Convalescent Home at Cromer and the Longacres Maternity Home at West Runton.

At present Infectious Diseases are treated at East Dereham Isolation Hospital and at Great Yarmouth Isolation Hospital.

## 3. The County Council.

The County Council provides through its various departments:-

### (a) The School Medical Service.

All Schools in the Area are visited at least once during the year. At these visits a systematic examination of entrants 5, 8 and 10 year-olds and leavers is carried out; arrangements are made for the treatment of defects found. All children previously found to have defects are also examined, and any not otherwise due to be examined who appear to require it. Special examinations are made of handicapped children, where necessary in their homes.

Minor ailment Clinics are held weekly at North Walsham and fortnightly at Cromer and Sheringham to serve these towns and the surrounding districts. Children not included in a school for any reason are also examined at home. Examination is also made of children when transport to school is believed necessary on medical grounds.

### (b) Maternity and Child Welfare Service.

An Infant Welfare Centre is held monthly at Holt and North Walsham and fortnightly at Cromer and Sheringham. Village Centres are held monthly at Banningham, Corpusty, Edgefield, Gresham, Matlaske, Northrepps, Roughton, Southrepps and Triningham. Immunisation and Vaccination are carried out at all centres at least quarterly.

### (c) Health Visiting

All children under 5 are visited regularly in their homes by a Health Visitor. In most cases the duty of Health Visiting is carried out by the local district Nurse-Midwife. She also attends the Welfare Centres in her area, and not infrequently assists at neighbouring ones. Children over 5 come under the supervision of the School Nurse.



(d) Midwifery.

This is performed by the District Nurse-Midwives and the general practitioner-obstetricians in the proportion of approximately 1.5 to 1. In this district the Longacre Maternity Home and Beckham House are available for confinements where domiciliary confinement is considered undesirable.

(e) Home Nursing.

This is carried out by the District Nurse-Midwives under the Norfolk County Nursing Association, who act as agents for the County Council.

(f) Vaccination and Immunisation.

This is carried out by general practitioners acting for the County Council, and by the Assistant County Medical Officer. In the case of children facilities are provided at the Infant Welfare Centres and, in the case of immunisation, at the Schools as well.

(g) Ambulance Services.

These are carried out by the St. John's Ambulance Brigade acting as agents for the County Council.

(h) General Measures for the Prevention of Illness, Care, and after-care including the provision of Nursing Equipment.(i) Home Helps.(j) Mental Health Services.(k) General Welfare Services under the supervision of the Welfare Officer.

He visits North Walsham on Thursday mornings at 11.a.m. and is available for interview at that time.

4. The Urban District Council.

The District Council, is, as ever, responsible for the control of Infectious Diseases and Environmental Health and Hygiene, acting mainly through the Medical Officer of Health and the Sanitary Inspectors.

Note:- Laboratory Services are provided at the Public Health Laboratory, Bowthorpe Road, Norwich, by the Ministry of Health.

In conclusion I must express my thanks to Mr. Yates for the invaluable help he has given in the preparation of this report.

I have the honour to be

Your obedient servant,

J. H. F. NORBURY.

M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

